

	Chase Rd.	CHECK APPROPRIATE Quarterly Report (Check one:) Final Report (Fu	rt: 1st und balance of the Repor	on Line E must be \$0)	4 th DDRESS CHANGE	FOR OFFICE (1. 2g	
E-mail address: Skill6	5@sbcglo	obal.net	CI	IECK FOR E-MAIL A	DDRESS CHANGE			
REPORTING PERIOD CASH AVAILABLE AT BEGINNII OF REPORTING PERIOD: 4/1/22 6/30/22 \$0 REPORTING PERIOD: 4/1/22 6/30/22 \$0 Repeat this amount in SECTION D, Line				ALL POLITICAL COMMITTEES RETURN TO: STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD SPRINGFIELD, IL 62704-4503 E-MAIL: D2@ELECTIONS.IL.GOV				
						EXPENDITURES		
a. Itemized (from b. Not-Itemized: 2. Transfers In a. Itemized (from b. Not-Itemized:	Schedule A):	\$542.28 \$155.17 \$\$	(1a) (1b) (2a) (2b)	b. Not-Item 7. Loans Made	(from Schedule B): nized: (from Schedule B):	\$	(6b)	
 3. Loans Received a. Itemized (from Schedule A): b. Not-Itemized 4. Other Receipts a. Itemized (from Schedule A): b. Not-Itemized TOTAL RECEIPTS (1a thru 4b) 		\$\$ \$\$ \$\$697.45	(3b)	8. Expenditures a. Itemized (from Schedule B) b. Not-Itemized 9. Independent Expenditures a. Itemized (from Schedule B) b. Not-Itemized TOTAL EXPENDITURES (6a thr		\$ 9): \$ \$	(8b) (9a) (9b)	
5. In-Kind Contribut a. Itemized (from b. Not-Itemized TOTAL IN-KIND (5a	i ons Schedule I):	\$ \$ \$	<i>(</i> =)	SEC 10. a. Itemized b. Not-Item	TION C — DEBTS (Include previously repo (from Schedule C): ized	AND OBLIGATION orted unpaid debts)	<u>NS</u>	
Name and address than the committee	of person subi	mitting this report i		Cash avantal Receipt Total Expenditure Fund reportin	SECTION D — CA ailable at beginning reporting perion is from Section A (1) Total cash (A) plus es from Section B (1) Is available at close ig period (C minus I ints total (if applicab	(a): \$\frac{0}{697.45} (b): \$\frac{697.45}{697.45} (c): \$\frac{697.45}{697.45} (d): \$\frac{697.45}{697.45}	(E)	
VERIFICATION: 1 DECLARE THE STATEMENTS) HAS BEEN EXA ARTICLE 9 OF THE ELECTION UP TO \$5000.	MINED BY ME AN CODE. I UNDERST	TO THE BEST THE BEST AND THAT WILLFULLY FI	T OF MY KNO	WLEDGE AND BELIEF IS A OR INCOMPLETE STATE	TRUE, CORRECT AND C	OMPLETE REPORT AS RECIVIL PENALTY OF AT LE	EQUIRED BY AST \$1001 AND	

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE

DATE

NAME OF POLITICAL COMMITTEE:	F	REPORTING PERIOD	FOR OFFICE USE ONLY					
Shawn Killackey for Lake County Board Dist. 2	4/1/22	6/30/22						
Lake County Board Dist. 2	FF	ROM THRU						
SCHEDU	LE A							
RECEIP	TS]					
CHECK THE PART OF FORM D-2, SE								
PART #1- INCLUDING TICKETS AND RAFFLE S	POLITICAL COMMITTEE IDENTIFICATION							
PART #2- TRANSFERS IN PART #2- INCLUDING TICKET AND RAFFLE SA	IONS PAR	RT #4- OTHER RECEIPTS	No. 373433					
SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.								
ITEMIZED RECEIPTS FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE RECEIVED	AMOUNT OF EACH REC	EIPT	AGGREGATE AMOUNT FOR THIS REPORTING PERIOD				
Friends of Holly Kim PO Box 1032 Mundelein, IL 60060	6/20/22	\$300.00 \$		\$ 300.00				
mundelen, ic 00000		EMPLOYER: Lake County		OCCUPATION: Lake County Treasurer				
		\$		\$				
		EMPLOYER:		OCCUPATION:				
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		\$		\$				
		EMPLOYER:		OCCUPATION:				
USE A SEPARATE SCHEDULE A FOR EACH PA	ARTS 1, 2, 3, 8	4 TOTAL	THIS PE	RIOD \$ ^{300.00}				

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